2000 UNIFORM BUSINESS REPORT (UBR) A94000001060 DOCUMENT # 1. Entity Name . FILED SECRETARY OF STATE 1991 GALBRAITH OIL AND GAS PROGRAM PARTNERSHIP. DIVISION OF CORPORATIONS 00 FEB 24 AH 10: 22 Mailing Address Principal Place of Business 400 E. SOUTH STREET.. SUITE 500 400 E. SOUTH STREET.. SUITE 500 ORLANDO FL 32801-2816 ORLANDO FL 32801 3. Mailing Address 2. Principal Place of Business 450 S. Orange Avenue 450 S. Orange Avenue DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3055528 Not Applicable Orlando, Orlando, Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 32801-3336 USA USA <u> 32801-3</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GALBRAITH, JAMES C Street Address (P.O. Box Number is Not Acceptable) 450 S. Orange Avenue 51 OAKLEIGH LANE MAITLAND FL 32751 Zip Code 32801-3336 City Orlando, 8: The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) MAKE CHECK PAYABLE TO DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$410,000.00 SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. \$410,000.00 as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12.

DOCUMENT # NAME STREET ADDRESS	GALBRAITH, JAMES C 51 OAKLEIGH LANE MAITLAND FL 32751	STREET ADDRESS	450 S. Orange Avenue
CITY-ST-ZIP DOCUMENT # NAME	698955 THE GALBRAITH MANAGEMENT COMPANY	STREET ADDRESS	Orlando, FL 32801-3336 450 S. Orange Avenue
STREET ADDRESS CITY-ST-ZIP	400 E. SOUTH STREET, SUITE 500 ORLANDO FL 32801	CITY-ST-ZIP	Orlando, FL 32801-3336
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

James C. Galbraith

407 650-1552

Date 2/18/00

Daytime Phone #

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